SUBJECT OF RESOLUTION: Promoting the health of migrants

SUBMITTED TO: The World Health Organization Executive Board

The World Health Organization Executive Board,

1 *Reaffirming* the Constitution of the World Health Organization's (WHO) recognition that health is a state
2 of complete mental, physical, and social well-being,

3 *Recalling* Sustainable Development Goal (SDG) Three's commitment to ensuring healthy lives and well-being
4 of all ages,

5 *Acknowledging* the Comprehensive Mental Health Action Plan 2013-2020, which promotes comprehensive
6 mental health services and the de-stigmatization of mental health disorders,

7 *Viewing with appreciation* the work done by the Doctors of the World and Art Refuge UK in providing
8 psychological and psychosocial support to refugees in Calais and Dunkirk,

9 *Deeply disturbed* that many populations comprised of migrant worker and refugees often do not receive
10 comprehensive health care addressing specialized medical issues,

11 *Strongly concerned* that many refugees are subjected to traumatic experiences in their country of origin,

12 *Regretting* that these traumatic experiences are often compounded with unstable and unhygienic living
13 conditions in the temporary shelters that refugees often inhabit,

14 *Firmly believing* adequate health care is necessary for the prevention of health security risks,

15 *Noting with concern* the detrimental effects sexual assault has on the survivor's mental and physical health,
16 specifically in refugee communities,

17 *Recognizing* pregnant women, children, and infants are among the most vulnerable groups affected by mi-
18 gration and its subsequent health risks,

19   1. *Encourages* Member States recognize specialized healthcare services, such as mental , maternal and
20 pediatric as key aspects of addressing health needs in migrant populations;

21   2. *Emphasizing* the importance of pediatric and infant care in migrant and refugee families, and the vulner-
22 ability of adolescent migrant populations:

23   (a) Encouraging governmental placement of pediatricians and child-care specialists within refugee
24 camps and migrant communities;

25   (b) Promoting the education of volunteers in child-care treatment to help accommodate child-care
26 needs for mothers;

27   (c) Requests educational classes for families about maintaining children's health in local communities;

28   (d) Affirming the benefits of creating support groups specifically intended for children which focus
29 on their mental well-being;

30   3. *Further recommends* that women's health and maternal health be recognized as crucial to the issue of
31 migrant health via:

32   (a) Endorsing the need for maternal healthcare wards and natal health resources in areas with large
33 migrant and refugee populations;

34   4. *Emphasizing* that migrants and refugees are more likely to experience mental health issues such as
35 post-traumatic stress disorder (PTSD), depression, anxiety, sleep disturbance, substance misuse:

36   (a) Recommends the establishment of community support groups by local governments and health
37 providers to destigmatize issues pertaining to mental health of migrants and refugees;

38   (b) Advises appointing local mental health professionals who have a background in the cultures and
39 communities that are affected by mental health issues;

40   (c) Encouraging the creation of educational programs for non-local health officials and volunteers
41 specifically involving;

42   (i) The scale of psychotherapeutic services being made available to migrants and refugees should
43   be broadened, given the likeliness of occurrence and severity of mental trauma among migrant
44   populations;

45   (ii) Providing language training and translators to better facilitate treatment;

46   (d) Concerned that migrants and refugees are more susceptible to suffer from severe depression,
47 PTSD, and debilitating forms of anxiety;

48   (e) Declares that the scale of psychotherapeutic services being made available to migrants and
49 refugees be broadened, given the likeliness of occurrence and severity of mental trauma among migrant populations;

50   (f) Affirms that raising awareness about the benefits of seeking health care will help reduce fear and
51 stigma associated with availing treatment for mental illnesses;

52   5. *Recommends* educating health care providers in the aiding of the recovery of sexual assault survivors,
53 both physically and mentally;

54   6. *Welcomes* the development of digital services for migrant health issues so that the information of best
55 practices, inexpensive legal support, and health and nutrition can be provided:

56   (a) Reaffirms the findings of the United Nations High Commission on Refugees (UNHCR) report
57 "Connecting Refugees" that improvements to mobile networks will have a positive impact on refugee populations, as
58 well as their host community;

59   (b) Recommends that this information be provided in a large number of languages, including lan-
60 guages commonly spoken by migrant populations;

61   (c) Further recommends that local organizations be involved in dispersing this information to migrant
62 communities;

63   (i) Emphasizes that the information that is being made available digitally is also made available in
64   physical copies at health care facilities, as migrants and refugees might not always have access to
65   the internet;

66   7. *Encourages* that Member States collaborate with outside organizations, non-governmental organizations
67 (NGOs), WHO and United Nations (UN) initiatives to provide specialized health care services to migrant and refugee
68 populations:

69   (a) Recommends that Member States seek to work with previously established initiatives address-
70 ing issues in women's and pediatric health, such as the United Nations International Children's Emergency Fund
71 (UNICEF) and WHO sponsored Network for Improving Quality of Care for Maternal, Newborn and Child Health;

72   (b) Further encourages collaboration with local mental health specific organizations to facilitate
73 regional provision of mental healthcare.

Passed by consensus, with 0 abstentions